MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/031018   FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5		4		4		
6		8		4		
7	1		1			
8		1		1		
9		1		1		
10		1		1		
11		4		4		
12	1		1			
13	1		1			
14			1			
15			1			
16			1			
17				5		
18				5		
19				5		
20				5		
21				5		
22				5		
23				5		
24				1		
25						
26						
27						
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37						
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46						
47						
48						
49						
50						
TOTAL IND.			7			
TOTAL DEP.			57			
TOTAL CLAIMS			64			

		*		*		*	
		IND.	DEP.	IND.	DEP.	IND	DEP.
51							
52							
53							
54							
55							
56							
57							
58							
59							
60							
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93							
94							
95							
96							
97							
98							
99							
100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS   U.S. DEPARTMENT of COMMERCE